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STRESSFUL LIFE EVENTS, DEPRESSION, AND THE EFFECTS OF  
PERCEIVED SOCIAL SUPPORT

by  
Kristen Schiers

A Thesis

Submitted in partial fulfillment of the requirements of the  
Master of Arts Degree  
of  
The Graduate School  
at  
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Approved by \_\_\_\_\_  
Advisor

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## ABSTRACT

Kristen Schiers  
STRESSFUL LIFE EVENTS, DEPRESSION, AND THE EFFECTS OF  
PERCEIVED SOCIAL SUPPORT  
2007/08

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Master of Arts in School Psychology

The purpose of this research study was to explore the relationship between stressful life events, depression and the effects of perceived social support. The researcher expected to find a positive correlation with higher stressful life events ratings predicting greater depressive mood. Also, the researcher hypothesized that people who have more hours of contact with social support systems would experience less depressive mood. Finally, it was expected that a significant interaction effect would be found such that the more contact with social support systems would weaken the effect of stress on depressive mood. The sample consisted of forty-five undergraduate students from a mid-size university. The results of the comparative analysis revealed a significant correlation between social support and life events, as well as a significant correlation between social support and depression. The results of the linear regression were not statistically significant. A significant interaction effect was not found between stressful life events, depression, and perceived social support. Limitations of the study and future implications for similar studies are discussed.

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## Chapter 1- The Problem

### *Need:*

Depression is a non-discriminative epidemic. Each year, people of every socio-economic background, age, sex, and ethnicity are afflicted. Recently, researchers have begun to look at depression levels on college campuses. Understanding the multidimensional precursors to depression at an earlier age would benefit psychological research on many levels. The college age population offers researchers the unique opportunity to study a collective population who share similar socio-economic backgrounds and environment.

Particularly, individuals in university settings demonstrate high rates of depression with onset usually coinciding with the years spent in college (Westefeld and Furr 1987). Numerous theories exist regarding direct indicators or predictors of depression and depressive mood. A widely studied idea is that stressful life events and one's ability to cope with such events could exist as predictors to depressive mood and/or depression. Researchers have begun to examine stressful life events in an attempt to determine what particular aspects of an event may lead to psychological distress (Shaw, 1982).

Additional research indicates that variations of depressive mood are associated with one's satisfaction with his or her social support system (Krause, Liang, & Yatomi, 1989). Results reported by Maher, Mora, and Leventhal, indicated negative cognitions to be linked with lower amounts of perceived support (2006). Cohen and Wills introduced

the idea of “buffers” to protect oneself from the negative impact of such stressful life events (1985). Further research is needed in order to better understand the impact that depression has on college age individuals in order to develop more effective preventative programs or “buffers”, intervention systems, and treatment facilities on campuses.

*Problem/ Purpose:*

The purpose of this study is to explore the relationship between stressful life events, depression, and the impact that perceived social support has on an individual’s depressive mood. In other words, the intention of this study is to assess the level of stressful life events reported by university students, the amount of social support they report receiving and their level of depressive mood. Gaining knowledge of potential indicators of depression and coping strategies, such as social support, may allow researchers to suggest future implementation of campus-wide programs and assistance.

*Significance of the Study:*

The goal of this investigation is to attempt to understand stressful life events experienced by college students, their perceived amount of social support, and the impact that support level has on depressive mood levels. Uncovering and understanding the impact different social support systems have on the relationship between stressful life events and depression can then be generalized across university and college settings nation-wide. Family support, teacher and faculty support, as well as roommate and significant other support relationships should be considered in order to determine the significance of developing specific programs that facilitate social support. The development of such programs could benefit those experiencing stress and depression while at college.



### *Hypothesis:*

A positive correlation with higher stressful life events ratings predicting greater depressive mood is expected. It is anticipated that people who have more hours of contact with support systems would experience less depressive mood. Finally, it is expected to find a significant interaction effect such that more contact with support systems would weaken the effect of stress on depressive mood.

### *Operational Definitions:*

Definitions for social support, stressful life events, and depressive mood will be established through the use of existing valid and reliable measures. For the purpose of this study perceived social support levels will be measured from an adaptation of the Multidimensional Scale of Perceived Social Support (Zimet, Dahlem, Zimet, & Farley, 1988). Stressful life events measures will be derived from the Life Events Scale (Saxe, L. L., & Abramson, L.Y. 1987). Finally, depressive mood is to be assessed by items taken from the Zung Depression Scale (Zung, 1965).

### *Assumptions/ Limitations:*

The main assumption of this study is the notion that the participants will accurately report their perceived amount of social support, levels of depression, and stressful life events. Recruitment methodology also presents certain limitations. Participants in this study are to be recruited through the use of a university subject pool. However, the university subject pool is limited to those individuals in the psychology majors, essentially limiting the generalization of the results to other populations. Also, correlational results, although informative, do not indicate causality, only associations.

Finally, the measures used in the study are adaptations or excerpts of larger, more detailed scales that may limit the amount of information obtained by the researcher.

*Overview:*

Chapter 2 will introduce and explore the vast amount of existing research regarding depression, stressful life events, and the role of social support. Supporting and contradictory theories will be investigated, ultimately setting the stage for the significance and applicable nature of the study. In Chapter 3, readers will be introduced to the design of the research project and the various components including participant selection, research strategy, treatments and interventions, as well as measures and data collection. In Chapter 4, results of the study will be reported and statistical analysis will be explained. Finally, in Chapter 5 the researcher will discuss the findings of the study, look back at the literature in comparison, introduce any limitations to the study and indicate potential future implications.

The current study intends to take an in-depth look at the impact strength social support has on the relationship between stress and depression. By examining the individual variable through past research, one will obtain a clear grasp of the significance of the study.

## Chapter 2- Literature Review

### *Introduction*

The following literature review focuses on the relationship between stressful life events, depressed mood and the impact of perceived social support. The review of the literature was researched systematically with three main categories in mind. The first category, depression, introduces the disorder and the subsequent research that has been performed regarding depression and depressive mood. The second category, stressful life events, focuses on a review of the existing literature concerning individuals' reactions and coping mechanism after experiencing stressful life events. The third category, social support, describes the buffer phenomenon of perceived social support and the implications past research studies have indicated.

### *Depression*

Depression is an epidemic that has encroached upon society at an international level, affecting individuals of various age, gender, and ethnicity. Previously, depression research has focused on population groups such as middle-aged women and minorities. Recently, researchers have begun to look at college campus populations. Understanding the multidimensional precursors to depression at an earlier age would benefit psychological research on many levels. The college age population offers researchers the unique opportunity to study a collective population who share similar socio-economic backgrounds and environment.

A study performed by Westefeld and Furr (1987) indicated that more than 80% of the college students that were surveyed reported experiencing depressed mood since going to college. Participants reported believing depression was a serious issue at their university. Feelings of loneliness and helplessness were also consistently reported (Berman & Sperling, 1991; Wolf, Scurria, & Webster, 1998). Cutrona (1982) found that 75% of freshmen college students reported feeling lonely their first two weeks at college. Consequently, other research has indicated there to be a negative correlation between such feelings of loneliness and helplessness and the attribution of those moods to causes within an individual's personal control (Calhoun, Cheney, & Dawes, 1974).

It appears that depressed individuals are less likely to receive social support and are less likely to utilize and recognize the benefits of support when it is being offered, as depressed individuals tend to view the world more negatively than nondepressed individuals. Depression may also influence one's view of self and others creating negative impressions through depressive beliefs. Experiencing such impediments makes adjusting to college all the more difficult (Beck, Rush, Shaw, & Emery, 1979).

The numerous stresses of college life, mixed with academic and social pressures, can trigger psychiatric symptoms in vulnerable people. Most families look at college as a new beginning. However, one must keep in mind that existing mental health problems and early symptoms do not go away by leaving for college (Mowbray, Megivern, Mandiberg, Strauss, Stein, Collins, Kopels, Curlin, Urbana, & Lett, 2006). For those individuals, being aware of services offered at campus and utilizing such services may decrease the likelihood that depression and depressive mood will go untreated.

Lower senses of coherence have been associated with increased risk of depressive symptoms in regards to facing college challenges (Ying, Tsai, & Lee, 2007; Ainsworth, 1973), while college students who are comfortable disclosing their emotions and distress to others reported decreased feelings of loneliness and subsequent depressive mood (Wei, Russell, & Zakalik, 2005). Furthermore, students who enhanced their social self-efficacy decreased their feelings of loneliness and subsequent depression (Wei et al., 2005). Particular personality traits have shown to affect one's ability to relate to others as well as seek out the assistance of a supportive system.

The literature also focuses on the social and personality driven aspects influencing depression. Social connection, whether familial or group, has shown to be a partial mediator of the effects of the personality trait perfectionism on depression (Rice, Leever, Christopher, & Porter, 2006; Blatt, 1995; Flett & Hewitt, 2002). Individuals who are considered "perfectionists" may experience significantly higher levels of hopelessness, depression and perceived stress. For those who are able to maintain close social connections, results indicate perfectionism has less impact on that individual's depression. Similarly, parental bond significantly indicates the positive effects of parenting on depression in a study performed by Patock-Peckham and Morgan-Lopez in 2007.

Researchers attempt to discuss the limitations of depression studies, indicating that the existing measures of depression and depressive mood collectively rely on self-report data which, in its own nature, requires accurate and honest participant responses (Watson, O'Hara, Simms, Kotov, Chmielewski, McDade-Montez, Gamez, & Stuart, 2007; Rice et al., 2006; & Wei et al., 2005). However, the overwhelming amount of data

regarding the negative impact depression has in the college-age population leads to an increased need for accurate research studies. Information obtained from such studies can greatly affect the way colleges and universities across the world implement preventative programs and counseling services.

Mental health services as a whole have been widely criticized and generalized as unable to access, offputting and lacking exposure. Implementations and recommendations for mental health services on college campuses have been discussed by Westefeld and Furr (1987) and have found that students at a small college reported experiencing many more problems in the areas of depression than the student participants at the two larger institutions they researched. The findings indicated that students at small college environments are more prone to experiencing isolation and loneliness than those at larger universities, contrary to existing research. Also, 42% of student respondents felt depression was a major problem on their campus. Participants reported the need to make people more aware of the symptoms and effects of depression and the need for more informative campus seminars (Westefeld & Furr, 1987). Mowbray et al. (2006) suggest that colleges and universities should take more active stances, increasing awareness about mental health issues and creating easy access to mental health services with well-trained staff.

Since the devastatingly negative impact depression has on individuals was identified, investigators set out to uncover specific, yet commonly experienced triggers of depression and depressive mood. In particular, researchers identified experiencing stressful life events as a significantly important trigger in relation to depression.

### *Stressful Life Events*

Numerous theories exist regarding direct indicators or predictors of depression and depressive mood. A widely accepted theory is stressful life events and one's ability to cope with such events could exist as predictors to depressive mood and/or depression. Increased incidents of stressful life events have shown to be significant predictors of subsequent distress and predictors of depressive symptoms (Monroe, Bromet, Connell, & Steiner, 1986). As college students begin to adjust to a new environment, academic pressures, and social groups, stressful life events at the college level begin to rise. Studies show social networks play an important role in mental health maintenance during and after stressful life transitions, with the effects of stressful life events noticeably reduced in the presence of social supports (Cobb, 1976; House, 1981). Better adjustment to stressful life events was also linked to intact social support systems, smaller increases in stress and depression levels (Brisette, Carver, & Scheier, 2002). Perceptions of social support availability predicted better adjustment to stressful life events overall (Cohen, 1992; Stroebe & Stroebe, 1996).

In addition, the literature indicates that specific personality traits may be linked to an individual's ability to easily and successfully cope with the negative experiences associated with stressful life events (Redfield & Stone, 1979). An individual's personality trait of optimism has indicated the ability to cope more effectively with stressors than a pessimistic individual (Carver, Scheier, & Weintraub, 1989). Furthermore, insecure individuals experience difficulty moderating their reactions to problems and stressful life events (Lopez, Mitchell, & Gormley, 2002). Lastly, positive attitudes towards and the ability to experience growth following stressful life events was

positively related to good psychological and physical health. Perceived growth after stressful life events was also related to more positive affect and less depression (Park & Helgeson, 2006). As the studies above indicate, an individual's personality traits play a critical part in one's ability to handle stressful life events as they occur.

Researchers have examined stressful life events in an attempt to determine what particular aspects of an event may lead to psychological distress (Shaw, 1982). Levels of stressful events in individuals' lives have been examined as well as certain "buffers" that people use to protect themselves from the impact of stressful events. Perceived availability of social support protected individuals from potentially undesirable effects of stressful events (Cohen & Wills, 1985; Barrera, 1986). Such social integration also protected against increases in anxiety under stress (Bolger & Eckenrode, 1991).

#### *Social Support*

Although a good deal of the inquiries on buffers has been explored, researchers are particularly interested in investigating individual's perceived social support systems. Social relationships have shown to buffer the effects of stress on an individual's mental health (Bolger & Eckenrode (1991). An individual's ability to form such social relationships can be dependent upon various aspects including personality traits, familial and peer interactions, closeness and also one's willingness to actively seek out and participate in building and sustaining social support systems.

Regarding personality traits, Schnider, Elhai and Gray (2007) investigated coping styles in students who attended colleges far distances from their families. The results of their study indicated that students with familial and peer support systems that were not in close proximity experienced difficulty engaging in active emotional coping.



Accordingly, people who cope well tend to be those who enlist support from those around them (Veroff, Kulka, & Douvan, 1981).

Those who have chronic problems with self-esteem and depression have more problems establishing social support connections than those without these issues (Dunkel-Schetter, Folkman, & Lazarus, 1986). Someone experiencing depression may not feel worthy of others' support or be able to accept the support. Recent studies indicate close relationship with family and friends are especially important (DeBats, 1999; Settersten, 2002). Some researchers believe family members appear more effective providers of social support than non-familial individuals for some forms of support (Cutrona, 1986). Others believe close friendships are the most important sources of social support (Berndt, 2004). Nevertheless, the widely accepted theory states that others, whether familial or non-familial, can ease our way through times of stress. The belief that others will be there for you is associated with a deeper sense of meaning over time (Krause, 2007) and therefore, researchers look for the impacts that these social support systems inevitably have on an individual's ability to cope with stressful life events and the development of depression.

Students at college face the daunting task of establishing new friendships and maintaining social connections from their past. Forming such social networks, the support they provide and the reliability of that support, can influence psychological well-being. Research performed by Cohen and Wills (1985) revealed that social networks generally influence psychological well-being by operating as a stress buffer. The perception of having available emotional support from others appears to account for much of the effects that social support has on stress (Coyne & DeLongis, 1986).

Similarly, perceived social support is a strong predictor of both attitudes and behaviors about seeking psychological help (Miville & Constantine, 2006; Monroe et al., 1986).

Even when people experience stress, having the support of others to rely on made it less likely that an individual would ineffectively cope with their stress, thus reducing negative psychological outcomes. Individuals with unsupportive social relationships experience a positive relationship between the increase of stress and physical symptoms both on the days they experienced stress and the days following stressful events (DeLongis, Folkman, & Lazarus, 1988; Caspi, Bolger, & Eckenrode, 1987).

The interaction with social networks can cause an individual to believe that they are valued and loved. In turn, these feelings of self-worth are a good determinant of well-being. The feeling of personal control plays an important role in maintaining good mental health (Pearlin, Menaghan, Lieberman, & Mullin, 1981). Undoubtedly, the evidence indicates the significant impact social support systems can have on an individual's physical and mental health.

However, a question arises; how do students choose those who they come to rely on and label as their social support? When looking and choosing someone to become a member of one's social support system, studies indicate students based their decisions on multiple criteria including a target's personality traits. Individuals who were seen as more supportive, less easily offended, and agreeable were chosen more often and depicted as being able to better assist the individual with their situation (Lutz & Lakey, 2001; Sarason, Pierce, & Sarason, 1990). Reports on social relationships stress the importance, if not requirement, of social competence when selecting an individual who will give support and aid in resolving conflicts (Schechtman & Katz, 2007). Also, feeling

confident that a person will be there when needed was essential to an individual's trust in one's social support system (Turan & Horowitz, 2007). The literature indicates that social support is most effective when it matches the needs of the perceiver and responsive effectiveness is based on the ability to detect and provide for a care seeker's needs (Reis, Clark, & Holmes, 2004; Horowitz, Krasnoperva, Tatar, Hansen, Person, Galvin, & Nelson, 2001).

Along with personality traits, researchers investigated satisfaction levels. Krause, Liang, and Yatomi (1989) studied the factors of satisfaction with one's social support and depressive symptoms. Results indicated that increased positive changes in depressive symptoms were associated with higher levels of satisfaction with one's social support. Similarly, Maher, Mora, and Leventhal (2006) found that depression (cognitive, mood, and somatic factors) was associated with a person's perceived support levels. The participants who reported negative cognitions perceived lower amounts of support over time. Higher levels of social support that reaffirms one's personal worth are significantly associated with lower depression levels among college students who reported experiencing stress (Elliot, Herrick, & Witty, 1992). Individual satisfaction with one's social support system appears to be associated with overall psychological and social well-being.

Cutrona defined social support as helping behaviors that included the actions of listening, offering advice, expressed viewpoints, positive feedback, and expressed caring or concern (1986). Participants reported helping behaviors more frequently after stressful events than times lacking stressful events. The participants who received the most helping behaviors perceived the highest levels of social support. In general, the study

indicated people who received more helping behaviors experienced less depression after a stressful event. Following stressful life events, individuals who reported more positive feedback and helping behaviors displayed lower levels of depressed mood (Cutrona, 1986). Interestingly, psychological distress levels and the persistence of social support may depend on the severity and ultimate duration of the stress (Mitchell & Hodson, 1983). The collective literature presented above indicates the negative impact that stressful life events have on depression levels and the positive impact social support systems can have when handling stress with relation to lowering depressive symptoms.

### *Summary*

To summarize, the consensus of the first category, depression, indicates that researchers should be focusing their studies on the college population and the depression phenomenon on college campuses (Westefeld and Furr, 1987). Feelings of loneliness and helplessness were consistently reported among this population (Berman & Sperling, 1991; Wolf, Scurria, & Webster, 1998) and researchers stressed the need for colleges and universities to take pro-active stances, increasing awareness about mental health issues and creating easy access to mental health services with well-trained staff (Mowbray et al. 2006).

In the second category, stressful life events, Shaw demonstrated the impact of stressful life events in association with depressive mood (1982). Redfield and Stone (1979) indicated that specific personality traits may be linked to an individual's ability to easily and successfully cope with the negative experiences associated with stressful life events. Perceived growth after stressful life events was also related to more positive affect and less depression (Park & Helgeson, 2006).

In the third category, Cohen and Wills introduced the idea of “buffers” to protect oneself from the negative impact of such stressful life events (1985). Numerous studies focused on social support as an effective buffer between stressful life events and depression. Schnider & Elhai (2007) looked at coping styles in students who attended college far distances from their families. Variations of depressive mood were associated with one’s satisfaction with his or her social support system (Krause, Liang, & Yatom, 1989). Similar results were reported by Maher, Mora, and Leventhal, indicating negative cognitions to be linked with lower amounts of perceived support (2006). Cutrona’s definition of social support allowed researchers to examine individual’s coping behaviors following a stressful event and the levels of depressive mood that resulted (1986).

Undoubtedly there is much that still needs to be learned about stressful life events and the impact that social support has on one’s depressive mood among the college-age population. Further investigation of such relationships will provide researchers and counselors with the ability to create preventative and informative programs on campuses and the understanding of implementing effective mental health programs for students.

### Chapter 3- Design

This study was designed to examine the relationship between stressful life events, depression, and perceived social support. This chapter discusses the methodology of the study.

#### *Sample*

Forty-five students from a mid-size university (10 males and 35 females, between the ages of eighteen to twenty-six) volunteered to participate in this study. Twenty-two additional individuals took the survey, however, were excluded from this study due to a lack of completion of required questions.

Two methods were employed when recruiting the participants for this study. The survey was made available to the students through the Psychology Department's student subject pool of volunteer participants. The students who completed the survey by this method stemmed from all majors and grades at the university. Secondly, a professor in the Education Department sent the survey via email to the students in his four undergraduate classes. All participants were treated in accordance to guidelines set forth by the American Psychological Association.

The participants included in the study were informed of the survey study by the researcher through a posting on the online research website and through the e-mail sent by the professor. Exclusion criteria included those who did not volunteer for the study, those who were not aware of the opportunity to participate, or those not enrolled in a Psychology elective course.

## *Measures*

A survey was developed and administered to the participants. The survey consisted of three sections with a total of ninety-eight questions. The first question topic, social support, consisted of twelve items adapted from the Multidimensional Scale of Perceived Social Support (Zimet, Dahlem, Zimet, & Farley, 1988). The second question topic, stressful life events, consisted of sixty-six questions derived from the Life Events Scale (Saxe, L. L., & Abramson, L.Y. 1987). The third question topic, depression, consisted of twenty items taken from the Zung Self-Rating Depression Scale (Carroll, Fielding & Blashki, 1973) and (Zung, 1965). All questions were presented in a Likert-type scale design; such as strongly disagree to strongly agree.

For the purpose of this study, the researcher focused on the data derived from three specific scales, two predictor variables and one criterion variable. The questions from the first predictor variable, perceived social support, were adapted from the Multidimensional Scale of Perceived Social Support (Zimet, Dahlem, Zimet. & Farley, 1988). The test-retest reliability of this measure ranges from .72 to .85. Cronbach's alpha for social support was .90. Participants were asked to report their perceived amount of social support in response to statements such as "There is a special person who is around when I am in need", "I get the emotional help and support I need from my family", and "I have a special person who is a real source of comfort to me".

The second predictor variable, life events, were derived from the Life Events Scale (Saxe, L. L., & Abramson, L.Y. 1987). Cronbach's alpha for life events was .94. Participants were asked to respond to numerous questions regarding the occurrence of

stressful life events including roommate events, close friend events, school related events, relationship events, and work related events.

The criterion variable depression was measured by items taken from the Zung Self-Rating Depression Scale (Carroll, Fielding & Blashki, 1973) and (Zung, 1965). Through this measure, participants were asked to respond to statements and questions to describe the way they had been feeling regarding topics such as sadness, pessimism, loss of pleasure, guilty feelings, crying, worthlessness, and others.

### *Design*

The study consists of two independent variables and one dependent variable. Therefore, there were two predictor variables and one criterion variable. The study was correlational and the researcher utilized results generated through SPSS to determine if two main effects and an interaction effect were found.

### *Hypothesis*

The researcher expected to find a positive correlation with higher stress ratings predicting greater depressive mood. It was anticipated that people who have more hours of contact with support systems would experience less depressive mood. Finally, I expected to find a significant interaction effect such that more contact with support systems would weaken the effect of stress on depressive mood.

### *Analysis*

Correlation tests were used to analyze the data due to the study consisting of two independent variables. A linear regression test was used to examine a potential interaction effect.



### *Summary*

The researcher conducted a correlational study utilizing the following three scales: the Multi-Dimensional Scale of Perceived Social Support (Zimet, Dahlem, Zimet, & Farley, 1988), the Life Events Scale (Saxe, L. L., & Abramson, L.Y. 1987) and the Zung Self-Rating Depression Scale (Carroll, Fielding & Blashki, 1973) and (Zung, 1965). Participants included forty-five students from a mid-size university setting. Statistical analysis through SPSS was conducted to determine if two main effects and an interaction effect were found.

## Chapter 4- Results

An examination of individuals' scores (N=45) from the online survey was tested at an alpha of .05. Results were analyzed in SPSS to determine if two main effects and an interaction effect were found. The results are presented in three parts: the main effect of stressful life events on depression, the main effect of social support on depression, and the interaction effect of social support impacting the relationship between stress and depression. Correlations are detailed in Table 1.

Correlation tests and a linear regression test were used in analyzing the data. Tests were conducted to discover the main effect of stressful life events, the main effect of social support, and whether an interaction effect on depression existed.

### *Main Effect of Stressful Life Events on Depression*

A correlations test did not reveal a significant main effect of stressful life events on depression. Levels of stressful life events were not correlated with higher levels of depression.

### *Main Effect of Social Support on Depression*

A significant negative correlation was found regarding social support,  $p < .05$ . Social support was negatively correlated with depression. Social support significantly predicted levels of depression such that those with higher levels of social support had lower depression scores.

### *Interaction Effect of Social Support, Stressful Life Events, and Depression*

A linear regression test revealed that the interaction of stress and social support did not significantly predict levels of depression. Greater levels of social support surrounding stressful life events did not predict lower levels of depression.

### *Additional Analysis*

However, a significant negative correlation was found between social support and stressful life events,  $p < .01$ , with increased levels of social support resulting in the occurrence of less stressful life events. The researcher did not hypothesize this relationship.

The statistical findings produced through the data analysis did not yield significant results supporting the overall hypothesis that stressful life events and social support would have a significant impact on an individual's depression level. In the next chapter, the researcher discusses the findings compared to current literature, the limitations of the study, and possible implications for future research.

Table 4.1

*Correlation Between Stress, Social Support, and Depression*


---

		SOCSUPP	DEPRESS	NEGEVENT
SOCSUPP	Pearson	1	-.354(*)	-.563(**)
	Correlation			
	Sig. (2-tailed)	.	.017	.000
	N	45	45	45
DEPRESS	Pearson	-.354(*)	1	.227
	Correlation			
	Sig. (2-tailed)	.017	.	.133
	N	45	45	45
NEGEVENT	Pearson	-.563(**)	.227	1
	Correlation			
	Sig. (2-tailed)	.000	.133	.
	N	45	45	45

\* Correlation is significant at the 0.05 level (2-tailed).

\*\* Correlation is significant at the 0.01 level (2-tailed).

## Chapter 5- Discussion

As mentioned earlier, depression is a non-discriminative epidemic. Each year, people of every socio-economic background, age, sex, and ethnicity are afflicted. Particularly, individuals in university settings demonstrate high rates of depression with onset usually coinciding with the years spent in college (Westefeld and Furr 1987).

The current study looked at the strength of impact social support has on the relationship between stressful life events and depression. Multiple regression analysis did not support the interaction effect hypothesized by the researcher. The results from the Multidimensional Scale of Perceived Social Support and the Zung Depression Scale showed a significant negative correlation with greater amounts of perceived social support indicating lower depression scores. Second, the findings from the Multidimensional Scale of Perceived Social Support and Life Events Scale indicated a significant negative correlation with increased social support resulting in the occurrence of fewer negative life events. However, results of this study failed to predict that social support would weaken the relationship between stress and depression.

Researchers expected to find a significant interaction effect such that more contact with support systems would weaken the effect of stress on depressive mood. A possible explanation for the inconsistency between hypothesis and results is that the participants may have not reported everyday stressors but only major events. This disparity could result in varying data, especially among college age participants who are

likely to experience small, but daily stressors. Furthermore, the sample size of forty-five participants is relatively small and may not be a true representation of a university population.

Interestingly, our findings are not consistent with previous research. Though, like Westefeld and Furr (1987), we found depression among college age participants and parallel to Krause, Liang, and Yatomi (1989), results indicated that increased positive changes in depressive symptoms were associated with higher levels of satisfaction with one's social support.

However, unlike Monroe, Bromet, Connell, and Steiner (1986), we did not find increased incidents of stressful life events to be significant predictors of subsequent distress and predictors of depressive symptoms. Also, we did not find there to be a perceived availability of social support protecting individuals from potentially undesirable effects of stressful events as reported by Cohen and Wills (1985) and Wei et al. (2005).

Thus, our findings support the generally widespread belief that stress is positively correlated with depression and perceived social support systems enable the alleviation of stressful life events. Although we did not find an interaction effect, the results of this study should not implicate a lack of relationship entirely.

This study had several limitations. The first limitation involves the Life Events Scale. The circumstances presented in the Life Events Scale questions discuss particularly major life events. The questions do not examine everyday events on the smaller, yet equally significant level.

A second limitation is concerned with the recruitment methodology. Although numerous steps were taken to ensure anonymity, a participant may have been concerned with divulging certain content in the survey because the survey was distributed via the Internet and/ or because of a perceived relationship with the professor emailing him or her.

A compensation issue poses a limitation for this study as well. Only the participants enrolled in courses requiring program credits received compensation in the form of course credit. Those recruited via email did not receive any form of compensation. Furthermore, those who did receive compensation may have felt obligated to complete the survey against their desired feelings because of pressure to fulfill a course requirement.

Finally, the length of the survey and the time required to complete the survey in its entirety poses a major limitation. The survey was estimated to take 30 to 35 minutes to complete. This may have been too long of a time for an individual to sit and answer honestly and with full attention to all of the questions, especially for those individuals who did not receive any form of compensation.

Future research should further investigate the role of social support in regards to the relationship between stress and depression. As shown, high levels of stress and depression exist in individuals of the college population. Studies should investigate the impact different social support systems have on this relationship. Family support, teacher and faculty support, as well as roommate and significant other support relationships should be investigated in order to determine the significance of developing specific programs that facilitate social support. The development of such programs could benefit

those experiencing stress and depression while at college. Despite the fact that this study did not find an interaction effect with social support weakening the relationship between stress and depression, the issue deems further investigation.



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